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B R I E F

FOR PRESENTATION TO

THE MEDICAL SERVICE INSURANCE ENQUIRY

BY

THE ASSOCIATION OF REMEDIAL GYMNASTS (ONTARIO)

(INCORPORATED)

P.O. BOX 51

WESTON, ONT.

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November, 1963

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I N T R O D U C T I O N

1. Mr. Chairman and Members of the Medical Service Insurance Enquiry, we, the representatives of the Association of Remedial Gymnasts of Ontario are cognizant of the privilege we enjoy today in appearing before you to present this "Brief".
2. We believe that our presentation will show that the role and employment of the specialty of Remedial Gymnasts and Recreational Therapy and of those who practice it can effectively contribute to the success which today's conception of Total Rehabilitation lays claim.
3. It is with this conviction that we present the "Brief" with the sincere hope that the services of skill and personnel will be made available to all who would benefit from them.

1. Mr. Chairman and Members of the Medical Service

Insurance Board, we, the representatives of the

Association of Remedial Gymnasts of Ontario are

pleased to have the privilege to appear before you today.

appearing before you to present this "Bill".

2. Digitized by the Internet Archive
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3. It is with this conviction that we present the

"Bill" with the sincere hope that the services of

skill and personnel will be made available to all who

would benefit from them.

S U M M A R Y

4. For the successful and complete rehabilitation of the sick or injured citizen the inclusion of the Remedial Gymnast into Ontario's Medical programmes of Health Services is most important.
5. These programmes in the broadest concept and designed for a healthy, vigorous population should be followed from infancy to old age.

Since the Second World War the employment of Remedial Gymnastics and Recreational Therapy in the treatment programme of Ontario medical institutions has been on the increase. It is hoped that as the skill and the value of the contribution made by the Remedial Gymnast in restorative programmes are more widely known and appreciated, his employment prospects will improve. To meet the expected increased demand for Remedial Gymnasts a suitable training plan leading to a sufficiency of qualified gymnasts to cope with the demand is imperative.

7. The "Brief" outlines:
 - (a) The general conclusions arrived at through a study of the present and future Role and Aims of Remedial Gymnastics and Recreational Therapy in the province of Ontario.
 - (b) Present and Future demands for the services of those who apply these skills, as a vocation,
 - (c) Present and Future training facilities, and
 - (d) The "Brief" concludes with appropriate Appendices.

C O N C L U S I O N S

8. In convalescent, physical maintenance and restorative phases of treatment, experience has shown that Remedial Gymnastics and Recreational Therapy do play a major role. This has helped to reduce the stay in hospitals or other institutions and enabled the person to enter into community activity and gainful employment more quickly. Also, through Recreational Therapy the patient is encouraged to maintain a cheerful outlook which has a direct effect upon his morale. This also helps to shorten the institutional stay.
9. A recent review has shown that the Remedial Gymnast is normally employed in institutions larger than 100 bed capacity. This number enables the gymnast to take the patients in class-form. Also, a number of hospitals who do not at present employ a Remedial Gymnast would do so when their programmes are developed.
10. The retirement age is approaching for many ex-service Remedial Physical Training Instructors and Remedial Gymnasts, necessitating replacement. Institutions desirous of employing Remedial Gymnasts are unable to find qualified personnel for inclusion in their rehabilitation programme. It follows that the way to solve these two problems is to establish a training programme in Remedial Gymnastics and Recreational Therapy.
11. For effective communication with other treatment auxiliaries, a comparable professional standard, leading to an acknowledged certification must be made available.

12. A large percentage of the public and some smaller medical institutions are still unaware of the Remedial Gymnast, his training, qualifications, and more important the role that he can play in effective rehabilitation programmes.
13. That the remuneration offered to the present day Remedial Gymnast is not one which will attract the right type of person who would wish to make this form of vocation a life-time career.
14. Where institutions employ the skills of Remedial Gymnastics and Recreational Therapy as well as those of Physiotherapy in the same programme, it is an indisputable fact that Remedial Gymnastics and Recreational Therapy do not compete with Physiotherapeutic procedures, but supplement them and where there is a team effort, in the true sense, both have their part to play; the physiotherapist concerned with individually prescribed specific treatment and the Remedial Gymnast taking over when this phase gives place to group activities in which the therapeutic role of the Remedial Gymnast is directed towards the complete conditioning of the whole person. In other words, it can be the means of bridging the inevitable gap which exists at the end of specific treatment and resumption of gainful employment or integration in the community.

R E C O M M E N D A T I O N S

For consideration by the Enquiry, The Association of Remedial Gymnasts (Ontario) recommends that:

15. The Remedial Gymnast be included in present and future Medical Care programmes where his services are beneficial and contribute to the treatment of the individual and the welfare of the population of Ontario as a whole.
16. That in larger institutions employing a Specialist in Physical Medicine, the Remedial Gymnast be employed, under his direction, to relieve the pressure of out-patient loads upon the Physiotherapist where exercise and general conditioning is the main purpose of the out-patient attendance. This would enable the Physiotherapist to devote more time and attention to the specific requirements of resident patients.
17. The Gymnast, trained in the specialty of Remedial Gymnastics and Recreational Therapy, be employed in public school and community programmes in which Prevention of Physical and Functional Deterioration and Correctional Therapy is a prime requisite. This health care should be the right of all, especially the youth of the province.
18. A course of training in Remedial Gymnastics and Recreational Therapy be established to meet the present and future demand for trained Remedial Gymnasts. This course should be comparable to that of the Remedial Gymnast in Great Britain and the Corrective Therapist in the U.S.A.

19. A programme to recruit suitable candidates for training as Remedial Gymnasts be instituted. This should be done at the Senior Matriculation level through the Vocational Guidance Counsellor service of the Department of Education.
20. To attract the right type of person into this profession an equitable salary must be offered.

HISTORICAL DEVELOPMENT OF REMEDIAL GYMNASTICS AND

RECREATIONAL THERAPY

21. The Remedial Gymnast and his title came into being at the close of the Second World War when the Department of Veterans Affairs included ex-service trained and qualified Remedial Physical Training Instructors in their Hospitals and Rehabilitation Centres staff.
22. Many Physical Training Instructors of the armed forces had received additional training in Remedial Exercise and Recreational Therapy, under medical direction, and were afterwards employed in casualty re-training, and physical conditioning programmes, hence the title. Emphasis in re-training and re-conditioning programmes was placed on exercise and recreational activities to counteract deconditioning and the abuse of rest in convalescence was re-discovered.
23. The ability of the service Remedial Physical Training Instructor to control and handle large groups, basic to all service officer and non-commissioned ranks, was largely responsible for the success of such programmes, and this ability is still today the reason why large organizations such as the Ontario Workmen's Compensation Board, the Department of Veterans Affairs, The Toronto General Hospital, etc. can adopt similar methods in their physical restorative programmes.
24. On discharge from the armed forces, Remedial Physical Training Instructors were employed by the Department of Veterans Affairs and, were given the opportunity of attending one of four courses in Remedial Exercise and Recreational Therapy, organized under the authority of, the Director of

24. (CONT'D)

Treatment Services, of the Department of Veterans Affairs, Ottawa, to standardize technical application to the changed need of the Department's charges.

25. Interested institutions such as Provincial Workmen's Compensation Boards, Physical Medicine Departments of General Treatment Hospitals and other Medical Institutions, in areas of large population in Ontario, have since that time trained Remedial Gymnasts of their own because they were unable to obtain them from any source in Canada.

26. Remedial Gymnasts were recruited either from qualified immigrant personnel or institutions have selected personnel themselves to train for work, under medical direction, in the institution's programme, in a similar manner as the armed forces R.P.T.I.

27. At the time of formation of the Association of Remedial Gymnasts (Ontario) on September 28, 1958 and to the present time, there is a decided difference of formal education and professional training among its members. Because of the shortage of qualified Remedial Gymnasts in Canada it had been necessary for institutions to accept persons who qualified under the "Drugless Practitioners Act", to "in-train" as Remedial Gymnasts. These persons were originally trained as masseurs rather than as Remedial Gymnasts and Recreational Therapists.

THE ROLE AND AIMS OF REMEDIAL GYMNASTICS AND RECREATIONAL THERAPY

28. Exercise and Recreation, in all its variety, is and will continue to be considered a most important part in any programme of physical and mental rehabilitation.
29. Successful Rehabilitation of the sick or injured person demands the Rehabilitation of the Whole Man. To spend much time on the physical deficiencies and ignore the psychological aspect of the patient is to invite disaster. Remedial Gymnastics, and more particularly Recreational Therapy, endeavours to blend them harmoniously.
30. An Ordered Continuity of treatment from bedside to complete reinstatement in industry or community has a highly beneficial psychological effect on the individual.
31. The broad concept of Rehabilitation envisages the Restoration of the Handicapped Individual to his or her fullest physical, mental, social, vocational and economic capacity.
32. Remedial or Preventive Physical Education was brought to the bedside and even to the pre-operative bed-patient in the service's programme. The emphasizing the importance of Early Graduated Training for Bed-cases was an important item in physical medicine programmes during the war and its importance is recognized increasingly today.

33. Successful rehabilitation requires co-ordination of all remedial measures from the bed-side through ambulatory convalescence right up to final reinstatement in the community or industry. In this the Remedial Gymnast, trained in all phases of treatment, is eminently suited.
34. The shortened hospitalization and convalescence resulting from co-ordinated treatment is of economic advantage to both the individual and the province.
35. The Basic aims of Geriatric Rehabilitation consists in the restoration of each elderly patient to the maximum degree of painless movement and physical function. Here is a fruitful field, for the employment of the Remedial Gymnast for physical disability may be restored or improved by systematic exercise.
36. As recovery continues, patients become less dependant upon skilled guidance of the physio-therapist, which is of an individual nature, and will graduate from it to the remedial gymnastic and recreation class. With others of comparable disabilities and similar stage of recovery stimulus can be gained from competition with fellow patients and from the sight of others with comparable injuries.
37. As recovery progresses, remedial gymnastics performed in large classes take the place of the individual specific exercise programme. By these means, not only local but general endurance and bodily strength is regained and patients are able to estimate their ability, not only to

37. (CONT'D)

do their job, but to perform the required number of work hours per day.

38. Briefly the aims of Remedial Gymnastics and Recreational Therapy are:

39. To restore maximum function.

40. To prevent or minimize physical deterioration in youth and old age as the result of disease or injury.

41. To revitalize the patient after protracted illness, injury or from long periods of inactivity.

42. To raise the morale of those who have been compelled by illness or disability to receive individual protracted treatment which tends to create self-centredness and thereby retards integration into community life or return to gainful employment.

43. To combine with other media of treatment in achieving the most effective programme of physical and mental restoration and rehabilitation for the individual.

44. Ontario is becoming increasingly aware that its youth needs a programme which will watch its physical and mental development in such a manner that as it matures it can effectively meet its obligation in the

44. (CONT'D)

modern world of industrial competition and mental tension. To this end, there will be need for a medically directed preventive as well as a physical corrective programme of health services during early school and adolescent age. It is in this particular field where individuals trained in the medical aspect of exercise and recreation programmes can play an important role. The Remedial Gymnast, being a person who is athletically inclined and sports-minded, will appeal to the teen-age group and because he is trained basically for group or class control as well as the individual, is a very suitable professional person to employ for this purpose.

THE HISTORY, PURPOSE AND AIMS OF THE ASSOCIATION OF REMEDIAL GYMNASTS

45. The Association's history is brief and began several years ago when some of those, who today are its members, were concerned with the fact that unless something was done to stimulate an interest in their employment, they and their specialty was heading for extinction.

It was decided to "close ranks", form an Association and prevent this from becoming an established fact. In September of 1958 the Association of Remedial Gymnasts (Ontario) was formed mainly by persons who were, at that time, engaged solely in the application of remedial exercises or recreational therapy in such specialized medical institutions as the Hospitals and Rehabilitation Centres of the Department of Veterans Affairs and the Workmen's Compensation Boards. A few General Hospitals had also entered this field of applied physical activities in their treatment programme.

46. The Association of Remedial Gymnasts (Ontario) was incorporated by Provincial Charter on April 23, 1963

47. The Association drew together those ex-service personnel who had been trained in Canada's armed forces in the specialty, as well as those who had received training through the Department of Veterans Affairs at the termination of the Second World War. The primary purpose was to further their usefulness to medically directed restorative programmes in private, service or public institutions and to further their mutual professional interests.

48. The aims of the Association are few and consistent with an organization which aspires to a permanent place in today's recognized rehabilitation team.

It aims to:

49. Establish and maintain the professional standing of its members.

50. Achieve and maintain their acceptance as an integral part of a medical team concerned with physical and mental rehabilitation.

51. Ensure a high standard of ethical practice combined with a policy of continuous education for its members.

52. Encourage the exchange of professional knowledge and to further friendly relations with other Provincial and National organizations of a similar character and standing.

53. To promote similar associations in other Provinces with the eventual development of a National Organization.

54. The Association of Remedial Gymnasts (Ontario) is firmly convinced that, given the opportunity and assistance from interested provincial authorities comparable to its counterpart in the U.S.A. and Great Britain, it can play a useful role in the developing Medical Health Programme for Ontario's citizens.

PRESENT AND FUTURE DEMANDS FOR REMEDIAL GYMNASTS

55. Since the Second World War, institutions employing Remedial Gymnasts do so for the part their skill can play in their particular programme. This skill is based upon sound and accepted physical and recreational training activities. The re-educational, corrective and psychological value of exercise and recreation is the skill they offer in the field of physical restoration, unfortunately at this time there are few institutions which find a place in their programme for this skill.
56. Some institutions employing Remedial Gymnasts are the Ontario Workmen's Compensation Board, the Department of Veterans Affairs, London, Ottawa and Toronto units, of Toronto General Hospital, the St. John's Convalescent Hospital, Willowdale, and the Canadian Red Cross Centre at Windsor. Several General Hospitals in the province have also included the Remedial Gymnast in their physical restorative programmes directed by a Specialist in Physical Medicine, particularly where a large out-patient load is a factor of concern.
57. It is conceivable that unless a programme of recruitment and training is introduced very shortly it will be an impossibility for the institutions now employing Remedial Gymnasts to find replacement for their present staff, let alone staff needed to meet the demands of an expanding Medical Services programme.

58. It is estimated that there are forty-seven persons known to be employed in the Province of Ontario in connection with Remedial Gymnastic and Recreational Therapy programmes.
59. It is an appalling fact that of the several hundred who were trained by the armed forces and the Department of Veterans Affairs during and after the termination of the Second World War that only a small percentage of the known Remedial Gymnasts in Ontario are left. It must be appreciated that under this circumstance, institutions requiring replacement of R.G. staff find it impossible to do so.
60. At this time the employment of a Remedial Gymnast in any particular institution is based upon several considerations.
61. (a) Does the Unit's budget permit the employment of the Remedial Gymnast?
62. (b) Is the restorative programme of the unit comprehensive enough to use his skill?
63. There is no way of estimating the number of Remedial Gymnasts that will be needed in Ontario's expanding Medical Services Plan, except that which is based upon the number employed by the armed forces which was approximately one Remedial Gymnast (Remedial Physical Training Instructor) per 50 beds. This estimate will

63. (CONT'D)

obviously need modification, depending upon the type of programme the individual institution employs.

64. The loss in the employment field of male gymnasts is small because those who are presently employed are at an age when to leave it to find another type of employment is a problem of vocational training and employer acceptance.

65. It is also pointed out that to train and employ a male may be less expensive than a female gymnast, because the replacement problem is not so acute, owing to the fact that the male will make his qualification the basis of a life-long career if the remuneration and working conditions are attractive enough.

66. If the Remedial Gymnast ceases to exist for lack of training and employment opportunity, the Association of Remedial Gymnasts (Ontario) feels, that a great dis-service will have been done to the many thousands of Ontario's citizens who could have benefited from the skill and dedicated service of its members.

PRESENT TRAINING FACILITIES

67. At present there is no formal training unit in Canada that trains and qualifies the Remedial Gymnast.
68. Institutions desirous of employing Remedial Gymnasts depend for their supply upon, 1. the disappearing ex-service Remedial Physical Training Instructor or, 2. the immigrant Remedial Gymnast trained at the school of Remedial Gymnastics and Recreational Therapy in Great Britain, or 3. because of more favourable working conditions and better remuneration, Remedial Gymnasts of other employers have sought employment with them.
69. To meet the need for employees in this skill, institutions have themselves trained a likely person, perhaps because that person was athletically inclined or had some experience or interest in physical training, or again, had shown an aptitude with patient handling. Some institutions, because of their need, have engaged persons who qualified under the "Drugless Practitioners Act" as Masseurs and, with supervision from a qualified Remedial Gymnast, provide in-training sufficient to enable these employees to take part in their treatment programmes.

Justifiably, no qualification has been granted by these institutions but it places these semi-trained persons under a disadvantage in that should they wish to leave and take up employment with another institution

they have nothing to show for the service they can render except it be a letter or testimonial as to the value of their past services.

70. The prevailing method of employing these persons to perform the function of a Remedial Gymnast is not in the best interests of a worthy Medical Auxiliary and should find no place in a province, medically wise and proud of its institutions as Ontario.

FUTURE TRAINING FACILITIES REQUIRED

71. To meet the needs of a developing Medical Programme of Health Services for the Province of Ontario, in which the Remedial Gymnast will be employed, it is imperative that a plan for the training of Remedial Gymnasts be considered. It is appreciated that this will pose a problem to medical and educational authority. The Association of Remedial Gymnasts (Ontario), will conscientiously and loyally play its part and afford every assistance it can in training personnel to take their place in the team of medical auxiliaries which will staff the Province's future medical service.
72. The philosophy of where and in what particular field of treatment his skill is best suited should be determined so as not to cause doubt or produce friction with allied therapies and to this end, training should be developed.
73. To recruit the right type of person to train as a Remedial Gymnast is important. The recruitment inducement should offer a professional future commensurate with the outlay of tuition fees and time given to gaining the necessary training and qualification. The cost in sacrifice of leisure time, the outlay of personal endeavour and perseverance should be rewarded by an equitable remuneration. These factors should be taken into account when setting the remuneration as the result of qualification.

74. At first, a small training unit and an approved curriculum should be established, offering a course in Remedial Gymnastics and Recreational Therapy, comparable to those offered in the U.S.A. and Great Britain, which will result in a formal acknowledgement of competence and acceptance by the older disciplines with whom the Remedial Gymnast will have to work.
75. The unit's size and teaching staff required could be decided by first making an enquiry as to the number of Remedial Gymnasts wanted by units in the province.
76. This course could be based, like some nursing courses, on a hospital or a rehabilitation centre where supervision by a physiatrist is available.
77. In this course, facilities for practical application of, and the gaining of further knowledge applicable to the professional part the gymnast will be expected to play upon graduation, should be made available in the form of internship during and after the termination of the course.
78. During the course it is necessary that there be a liaison maintained between the educational unit and prospective employers for those who graduate. A recent review (see table 1, Appendix "B") demonstrated that there is an awakening interest in the employment of Remedial Gymnasts which wait upon the development of a number of institution's treatment programmes and this fact alone warrants a consideration of this training as soon as possible.

F I N A N C E S

79. As we have no means of establishing the cost of such courses, we submit that the institution, willing to teach this course, is the authority able to compete the cost.

DEFINITIONSTHE REMEDIAL GYMNAST

The Remedial Gymnast employs the basic skills of physical education and recreational therapy which is augmented by further training, under medical direction, qualifying him to participate in organized therapeutic programmes in the preventive, specific, conditioning and maintenance phases of physical restoration of the normal, sick and injured citizen.

REMEDIAL GYMNASTICS

Remedial Gymnastics is the scientific application of bodily movement in treatment of disease and mal-function, performed in a gymnasial atmosphere.

RECREATIONAL THERAPY

The diversity of recreation is so great that for the purpose of this brief it can be divided into:

- (a) Social
- (b) Therapeutic

SOCIAL RECREATION includes such activities that form the basis of personal contact among patients such as: film shows, stage shows, "sing-alongs", various group and individual competitive contests, diversional creative skills, supervised crafts, e.g. leather, shell and bead work, modelling, etc.

THERAPEAUTIC RECREATION consists of physical activity employed on a group or individual basis in which competitive team games, played in a gymnasial atmosphere, on a sports field or indoors, originating from a medical prescription. It aims to re-create or re-develop maximum mental and physical function of the sick or injured patient. This form of activity is confined, in the main, to the convalescent or advanced stage of total rehabilitation programmes in hospitals and convalescent establishments.

DATA DERIVED FROM QUESTIONNAIRE SENT TO MEDICAL
INSTITUTIONS OF 100 BED STRENGTH MINIMUM

TABLE # 1

KNOWN PROVINCIAL WORK STRENGTH - BY INSTITUTION

SUNNYBROOK HOSPITAL D.V.A. TORONTO	8	W.C.B. HOSP. & REHAB. CENTRE, DOWNSVIEW.	16
WESTMINSTER HOSPITAL D.V.A. LONDON, ONTARIO	6	MC KELLAR GENERAL HOSPITAL, FORT WILLIAM	1
D.V.A. OTTAWA	1	ST. JOSEPH'S GENERAL HOSPITAL, PORT ARTHUR	1
RED CROSS CENTRE WINDSOR, ONTARIO	1		
TORONTO GENERAL HOSPITAL	2	SUDBURY GENERAL HOSPITAL	1
LYNDHURST LODGE TORONTO	1	MEDICAL CLINICS AND PRIVATE PRACTICE	8
ST. JOHN'S CONVALESCENT HOSPITAL WILLOWDALE, ONTARIO	1		
		TOTAL	47

NOTE: It is understood that there are recreational therapists employed in the Ontario Hospitals Dept. of Health, but we have been unable to gain employment numbers.

TABLE # 2

REMEDIAL GYMNASTIC TRAINING - SOURCE

D.V.A. COURSE R.P.T. INSTR.	GREAT BRITAIN REM. GYMNAST	COLL.MASS.& HYDRO. TORONTO (MASSAGE)	OTHERS - P.T. ETC.	TOTAL
20	4	15	8	47

CONSTITUTION, BY-LAWS & CODE OF ETHICS
of
THE ASSOCIATION OF REMEDIAL GYMNASTS (ONTARIO)

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F O R E W O R D

IN THIS CONSTITUTION

- (a) "Association" means The Association of Remedial Gymnasts (Ontario).
- (b) "Secretary-Treasurer" means the Secretary-Treasurer of the Association.
- (c) "Executive Committee" means the Executive Committee of the Association.

The Association is a body of persons engaged in the professional application of therapeutic exercises and recreational therapy under medical direction.

OBJECTIVES

It is the purpose of the Association to

1. Establish the professional standing of its members.
2. Achieve and maintain their acceptance as an integral part of a medical team concerned with physical and mental rehabilitation.
3. Ensure a high standard of ethical practice combined with a policy of continuous education for its members.
4. Encourage the exchange of professional knowledge and to further friendly relations with other provincial and national organizations of a similar character and standing.
5. Promote similar associations in other provinces with the eventual development of a national organization

ADDRESS

The address of the Association will be P.O. Box 51, Weston, Ontario,
CANADA.

This will only be changed when approved by the Executive Committee.

BY-LAW 2

MEMBERSHIP

1. Definition

(a) Active Membership is held by a paid-up member of the Association engaged in the practice of remedial gymnastics and recreational therapy.

(b) Non-Active Membership is held by a paid-up member of the Association who, although not practising remedial gymnastics and recreational therapy, wishes to retain membership.

(c) Temporary Membership is granted, on payment of the appropriate fee, to those who are employed in the field of remedial gymnastics and recreational therapy but are not graduates of an approved school. This temporary membership may be held until such time as full membership is granted or refused (see Section 2, para. (c) below).

(d) Honorary Membership is bestowed upon eminent persons whose interest in or assistance to the Association has been particularly significant.

(e) Members in Good Standing are those fulfilling the above requirements.

2. Eligibility

(a) Active Membership is open to all persons who are bona-fide practitioners of remedial gymnastics and recreational therapy and who were engaged in their profession on the formation of the Association (September 28th, 1959).

(b) Non-Active Membership may be held by any active member who leaves the practising field of the profession. This will be granted on application to the Chairman of the Executive Committee of the Association. Similarly, a non-active member who returns to the practising field may, on application to the Chairman of the Executive Committee regain active membership.

(c) Temporary Membership is offered to semi-trained personnel hired because of the shortage of qualified remedial gymnasts. These persons, under medical supervision, may perform certain duties normally carried out by the qualified remedial gymnast. An applicant in this category shall, subject to ratification by the Executive Committee, be granted a temporary membership until such time as he can furnish a formal qualification granted by a recognized training school. A temporary membership will be valid for two years from the date of issue. Termination of membership is automatic on expiration of this period and the temporary member will be so notified by registered mail by the Secretary-Treasurer.

Only under extenuating circumstances will membership in this classification be renewed and then only with the approval of the Executive Committee.

3. Qualifications

(a) Membership

(i) Applicants for membership in the Association must be of good moral character, temperate and willing to subscribe to the principles of the Constitution, its By-Laws and to maintain its Ethical practices.

(ii) Applicants must have graduated from an authorized training school in Canada; the School of Remedial Gymnastics and Recreational Therapy, Great Britain, Graduates of Corrective Therapy of the U.S.A. Graduates from training schools or members of Associations other than those listed above will receive individual consideration.

(b) Temporary Membership

(i) Persons duly registered as Masseurs under the "Drugless Practitioner's Act" of Ontario will be considered to have sufficient theoretical knowledge to meet the Association's Requirements. They will, however, be required to work for a twelve month period in the field of remedial gymnastics and recreational therapy. At the end of this period it will be obligatory to take a practical and an oral examination conducted by a board of examiners appointed by the Association.

(ii) Semi-trained persons wishing to apply for temporary membership should hold their Junior Matriculation (Ontario) or equivalent.

However, applicants from H.M. Forces will be granted a reasonable time to attain this standard of education. The time limit will be set by the Executive Committee.

4. Applications

(a) Requests for membership should be made to the Secretary-Treasurer. A membership application form will be sent to the applicant. This will be completed and returned to the Secretary-Treasurer with the requisite fees (By-law 7.) A receipt will be forwarded to the applicant.

(b) The Secretary-Treasurer will place the completed membership application form before the Executive Committee at its next meeting, together with any other relevant material supporting the application and a signed certificate showing the fees have been paid.

(c) The Secretary-Treasurer will inform the applicant in writing of the result of the Executive Committee's decision. If the application is approved, the Secretary-Treasurer will place the name of the applicant on the Register.

(d) Following approval by the Executive Committee a Certificate of Membership will be presented to the successful applicant.

(e) If the decision of the Executive Committee is unfavourable to the applicant the Secretary-Treasurer will make this known to the applicant by registered mail and will, at the same time, return any fees which have been paid.

5. Expulsion

- (a) The Executive Committee may expel any member for conduct prejudicial to the interests of the Association, for any breach of the By-laws, regulations, Code of Ethics and for the non-payment of fees.
- (b) A member liable for expulsion, except for non-payment of annual fees will be given a reasonable opportunity to present his case to the Executive Committee and to this end he shall receive due warning, by registered mail, one month prior to the hearing of his case.
- (c) Upon expulsion, the member's name shall be removed from the Register.

6. Resignations

- (a) A member may resign from the Association at any time on written notification to the Secretary-Treasurer.
- (b) On receipt of such notification, the Secretary-Treasurer will forward it to the Chairman of the Executive Committee for ratification.
- (c) The Secretary-Treasurer will record the resignation and will erase the ex-member's name from the Register.
- (d) The Secretary-Treasurer will inform the ex-member of such erasure by registered letter and will request the return of his membership certificate.

BY-LAW 3

COMMITTEES & OFFICERS

1. The elected officers of the Association shall be

President
Vice/President
Secretary-Treasurer
Executive Committee members (five)

2. The above officers shall be elected annually at the General Business meeting of the Association.
3. No officer shall be elected unless he is in good standing and cannot be voted into office in absentia.
4. Terms of office are for one year with the exception of the Secretary-Treasurer who will serve for a two year period.
5. The elected officers may, at their discretion, exercise all the rights and powers of the Association, with the exception of those which are by law or by the By-laws, required to be exercised by the Association in General meeting.

6. The Executive Committee shall have the power to select, from the members in good standing, a substitute for the remainder of the fiscal year in the event of the death, incapacitation or resignation of one of its members.

7. The Executive Committee shall consist of the President and Vice-President of the Association and the five Executive members.

8. The Executive Committee may appoint and regulate such sub-committees as it deems necessary to further the administration of the Association.

9. The Secretary-Treasurer will attend all General meetings of the Association, the quarterly meetings of the Executive Committee and such special meetings as may be called from time to time. He will record the minutes of all meetings he attends in his official capacity. During such meetings he will not be called upon to vote on any motion.

BY-LAW 4

MEETINGS

1. Types of Meetings

Two types of meetings will be held which all members will attend, viz. the Annual Business Meeting and Special Meetings

At a Special Meeting only the business for which the meeting was called will be discussed. This business will be made known to all members in the letter containing the notice to attend.

Such a meeting can only be called by

- (a) a majority of the Executive Committee or
- (b) at least one-third of the total number of members.

2. Location of Meetings

The Executive Committee (or some other qualified body) is empowered to decide where each meeting will from time to time be held, with the exception of the Annual Business Meeting. This will be held in Toronto, Ontario.

3. Meeting Procedures

The accepted order of business at all meetings will be,

- (a) Roll call and reading of names of those members who have forwarded notices of absence.
- (b) Reading of the minutes of the previous meeting and adoption of same.
- (c) Financial report and adoption of same.
- (d) Report of sub-committees.
- (e) Reading of correspondence.
- (f) Business arising out of the minutes.

- (g) Applications for and approval of membership.
- (h) Election of officers (when necessary).
- (j) New business.
- (k) Motion of adjournment.

4. Quorum

- (a) At all General and Special meetings a quorum shall consist of one-third of members in good standing.
- (b) At Executive Committee meetings a quorum shall consist of five members.
- (c) A quorum is necessary to implement By-law 5, para. (a).

5. Notices and Reports

- (a) The Secretary-Treasurer will send out notices of the Annual Business meeting to all members thirty days in advance. Members unable to attend should forward notices of absence to the Secretary-Treasurer.
- (b) Executive and sub-committee meetings shall be called at least quarterly and as often as deemed necessary by the President.
- (c) Chairman of sub-committees shall furnish reports of their business to the Executive Committee.

6. Voting

- (a) Only Active members in good standing shall be entitled to vote at any meeting.
- (b) Non-Active, Temporary and Honorary members are not entitled to vote but may engage in discussion on any subject placed before the meeting.
- (c) A simple majority of those present and entitled to vote shall decide all questions put to the vote at any meeting. In the event of a tie, the presiding officer may record a casting vote.
- (d) The counting of votes shall be by a show of hands unless a ballot is requested by a member present at the meeting.

BY-LAW 5

AMENDMENTS TO BY-LAWS

- (a) No By-law shall be altered or amended, nor no new By-law established except by a majority vote at an Annual or Special meeting.
- (b) Notice of alterations, amendments or additions to the By-laws shall be published at the time notices are sent to members acquainting them of the meeting.

BY-LAW 6

FINANCE

1. The fiscal year of the Association shall begin on the first day of January and end on the thirty-first day of December of each year.
2. The accounts of the Association, together with an annual financial statement and balance sheet shall be audited prior to the Annual Business meeting.
3. Before a retiring Secretary-Treasurer, either through expiry of office or at his own request, hands over his office to his successor an audit will be performed. The cost of such audit if necessary to be borne by Association funds.
4. The Executive Committee may, from time to time, authorize the Secretary-Treasurer to open and maintain a bank account or accounts at such bank or banks as it may select and may authorize one officer of the Executive Committee and the Secretary-Treasurer to transact the Association's banking business with any such bank or banks, and generally to make, sign or execute on behalf of the Association, such papers, documents or instruments, whether negotiable or not, as may be necessary or expedient for the Association's banking business.

The following accounts will be established as necessary

- (a) The General Account
- (b) The Petty-cash account of the Secretary-Treasurer
- (c) Additional accounts as directed by the Executive Committee.

BY-LAW 7

FEEES AND FINES

1. (a) Initiation Fee

The Initiation fee for Active and Non-Active membership shall be a sum decided upon by the executive committee and approved by a vote of the membership at an annual or special meeting. This sum will cover the cost of the membership pin, certificate and identification card.

(b) Annual Fee

(i) For Active and Temporary Membership, the Annual fee shall be a sum decided upon by the executive committee and approved by a vote of the membership at an annual or special meeting.

(ii) For Non-Active Membership the annual fee shall be 50% of the fee paid by the Active membership.

(iii) A person whose application form is received by the Secretary-Treasurer after June 30th will pay 50% of the current annual fee.

(iv) Annual fees must be paid by February 1st of each year.

2. Fines

(a) Annual fees not received by February 1st of each year will carry a fine of 25% up to March 31st and thereafter an additional 25% of the year's fees.

(b) Members one year in arrears with payment of fees will be expelled as of February 1st. Notification to this effect will be sent by mail, one month previously, adding the outstanding year's fees and fines to the current notification of fees due.

THE CODE OF ETHICAL PRACTICE of the REMEDIAL GYMNAST

1. A member shall willingly submit himself to, and comply with, the Constitution and By-laws of the Association for the time being in force.

2. A member shall not, in his professional capacity or in private dealings with a patient or patients, undertake to give or accept responsibility for a form of treatment for which he does not hold a qualification.

3. A member shall not at any time, in his professional or private capacity, give treatment that has not been prescribed or directed by a medical practitioner.
4. A member shall not at any time, in his professional or private capacity, discuss any prescription in such a manner as to cast suspicion or doubt on the validity or worth of such prescription or upon the skill or honesty of any medical practitioner.
5. A member shall not discuss the merits or skill of another medical auxillary in such a way as to bring discredit upon that person or upon the institution in which the auxillary received his or her training.
6. A member shall not discuss the private or public conduct of a patient in the hearing of those unconnected with the treatment of such a patient.
7. A member shall keep inviolate the personal confidence of a patient so long as it does not conflict with the constitutional law of the land or the prescription or direction ordered by the medical practitioner in charge of the case.
8. A member shall not misrepresent his skill, directly or indirectly, in any form of advertising.
9. A member shall at all times respect his professional superiors and other members of the medical team in which he works.
10. A member will at all times keep his person in a neat appearance and avoid all slovenly manners when in public or in the course of his practice among his patients.

